

## **ANIMAL OFFENSE REPORT**

Case #:		

Date

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City of Marthasville Comple	ainant:		
Address:			
Phone #:	Email:		
Witness Name:	Address:	Phone #:	
	ANIMAL INFORMATION		
Breed:	Size:		
Color:	Hair Leng	gth:	
Description / Markings:			
Name of Owner:		Phone #:	
Owner Address:		i none ii.	
	DETAILS OF OFFENSE		
Date of Violation:	Time Violation Began:	Time Violation Ended:	
Place of Occurrence:			
Place of Occurrence.			
Was this offense reported to law enforcement?		Date:	
Officer Assigned:	Time of Investigation:		
Suspects &/or Persons Arrested:			
	er circumstances of this offense and	its investigation below:	
State fully all other	er circumstances of this offense and	its investigation below.	
		ent the complainant is acknowledging that the facts ates that the complainant is willing to testify in a court of	

Report Made By